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TRANSM		Application Number		10/602,242								
FOR		Filing Date		June 24, 2003								
(to be used for all correspon	ial filing)	First Named Inventor		Ye FANG et al.								
			Group Art Unit		1641							
		Examiner Name		Nelson C. Yang								
Total Number of Pages in This Submission			Attorney Docket Number		015275-06007							
ENCLOSURES (check all that apply)												
			COST Papers		After Allowance Communication to Grou							
Pec Attached	(for an A	pplication)		Appeal Communication to Board of								
Amendment/Reply		Drawing(s)			Appeals and Interferences Appeal Communication to Group							
After Final		Declaration and Power of Attorney			(Appeal Notice, Brick Reply Brick)							
- Alter Pullar	Licensing-related Papers			Proprietary Information Status Letter								
Affidavits/declaration(s)		Petition to Convert to a Provisional			Application Data Sheet							
Extension of Time Request  Express Abandonment Request		Applicati	ion		Request for Corrected Filing Receipt with							
Information Disclosure Statement		Change	Arterney, Revocation of Correspondence Address		A self-addressed prepaid postcard for acknowledging receipt							
Certified Copy of Priority			Disclaimer		Other Enclosure(s) (please identify below							
Document(s)		CD, Number of CD(4)										
Response to Missing Parts/		Remarks										
Incomplete Application		The Commissioner is bereby authorized to charge any additional fi										
Response to Missing Parts under 37 CFR 1.52 or 1.53		required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.										
	SICNATIN	OF ARM	(C.) *****									
Firm		ez-Chua Reg. No. 48,627										
or Individual name	Nixon Peat	xez-Chua K xedy LLP	eg. No. 48,627									
	et, N.W.											
	Suite 900 Washington	a, D.C. 2000	1.2128									
Signature		1. Lpg-6			<del></del>							
Date	July 30, 20	07										
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CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]												
I hereby certify that this con		_										
deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop, Commissioner for Patents, P. O. Box 1450 Alexandria, VA 22313-1450												
-		date shown l	pelow to the United Sta	tos Pa	tent and Trademark Office at							
( X . / / Ku / C )												
Date Signature												
Pamela Patrick												
	Typed or printed name											

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	T			_	Complete if Known			
FEE TRANSMITTAL	Appli				10/602.242			
	Filing	Filing Date			June 24, 2003 REC		<del>/ED</del> -	
FOR FY 2005	First Named Inventor			Ye FANG et al. CENTRAL	FAX	CENTER		
Patent fees are subject to annual revision.	Examiner Name			NI=1				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit			1641 JUL	<del>J U</del>	<del>200/ -</del>		
TOTAL AMOUNT OF PAYMENT (\$)120.00	Atton	ney Docl	ket No.		015275-060007			
METHOD OF PAYMENT (check all that apply)								
	1, 7	TICOL	DNAT	Perc	FEE CALCULATION (continued)			
Check   Credit Card   Money   Other   None	]	(DDX I I	UITAL	rees		1		
Deposit Account:	Large	Large Entity   Small Entity						
Deposit	Fee	Fee	Fee	Fcc	Fee Description			
Account 19-2380 Number	Code 1051	( <b>S</b> )	Code					
	1051	50	2051	65 25	Surcharge - late filling fee or eath			
Deposit					Surcharge - late provisional filing fcc or cover sheet		1	
Account Nixon Peabody LLP	1053	130	1053	130	Non-English specification			
Namo	1812	2,520	1812	2,520	For filing a request for ex parte reexamination			
The Commissioner is authorized to: (check all that apply)	1804	920*	1804	920*	Requesting publication of SIR prior to fixaminer action			
Charge fec(s) indicated below Credit any overpayments	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner			
Charge any additional foc(s)	1251	120	2251	60	action Extension for roply within first month	إبيا	20.00	
Charge fee(s) indicated below, except for the filling fee	1252	450	2252	225	Extension for reply within second month	131	20.00	
to the above-identified deposit account.	1253	1,020	2253	510	Extension for reply within third month	$\vdash$		
FEE CALCULATION	1254	1,590	2254	795	Extension for reply within fourth month	-	—	
J. BASIC FILING FEE	1255	2,160	2255	1,080	Extension for reply within fifth month		——	
Large Entity Small Entity For Fee Fee Fee Fee Description	1401	500	2401	250	Notice of Appeal	$\vdash$		
Code (5) Code (5) Fcc Paid	1402	500	2402	250	Filing a trief in support of an appeal			
	1403	1,000	2403	500	Request for oral hearing	$\vdash$		
1001 300 2001 150 Utility filing foe	1451	1,510	1451	1,510	Perition to institute a public use proceeding			
1002 200 2002 100 Design filing fee	1452	500	2452	250	Petition to revive - unavoidable	П		
1003 200 2003 100 Plant filing foe	1453	1,500	2453	750	Petition to revive - unintentional			
1004 300 2004 150 Reissue filing foe	1501	1,400	2501	700	Utility issue fee (or reissue)			
1005 200 2005 100 Provisional filing fee	1503	1,100	2503	***	Publication fee			
SUBTOTAL (1) (S) 0	1460	1,100	1460	550 130	Plant issue (ee Pethions to the Commissioner			
\$08101AL(1) (\$) 0						Ш		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1807 1806	50 180	1807	50 180	Processing fee under 37 CFR 1.17(q) Submission of Information Disclosure Sum	$\Box$		
Fee from	8021	40	8021	40	Recording each patent assignment per property	$\vdash \vdash$	$\vdash$	
Total Ciaims20** X = 0	1809	700	2500	•	(times number of properties)	Ш		
	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))			
Independent3**=X = 0	1810	790	2810	395	For each additional invention to be examined			
Multiple Dependent X = 0	1801	790	2801	395	(37 CFR 1.129(b)) Request for Continued Examination (RCB)	<b> </b>	<del>  </del>	
Large Entity Small Entity	,,,,							
Fee Fee Fee Fee Description	1802	900	1802	900	Request for expedited examination of a design application			
Code (\$) Code (\$)	Other	lee (specil	fy) <u>5 601</u>	t.copies		Н		
1202 50 2202 25 Claims in excess of 20		-			- <del></del>			
1201 200 2201 100 Independent claims in excess of 3	*Redu	ced by Ba	sic Filis	g Fee De:	d SUBTOTAL (I) (C) 120.00			
1203 360 2203 180 Multiple dependent claim, if not paid		. v= vj <b>./</b> 0	-iv a init	g , a)	SUBTOTAL (3) (5)120.00		<b></b>	
1204 200 2204 100 ** Reissue independent claims over	1		CERT	LFIÇATE	OF MAILING OR TRANSMISSION [37 CFR 1.8(a)	a		
original patent 1205 50 2205 25 ** Reismo obiins in excess of 20 and	I hen	I hereby certify that this correspondence is being:						
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SUBTOTAL (2) (5) (	1	postage as first class mail in an envelope addressed to: Mail Stop Commissioner for Patents, P. O. Box 1430, Alexandria, VA 22313-1450						
••or number previously paid, if greater, For Reissues, see above	uransmitted by Bestimile on the days shown yellow to the United States Patent and							
	Trademark Office at 571-273-8300.							
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Typed or printed name SUBMITTED BY Complete (if applicable) Registration No. (Assorney/Agent) Cecilia Lopez-Chua 48,627 (202) 585-8000 Name (Print/Type) Telephone Signature Date July 30, 2007

Pamela Patrick